

the differences in conditions among different communities.

In some sense it is humiliating, but it is unavoidable, to admit that the law of supply and demand as well as the quality of the service must largely control charges for professional conduct, just as truly as for charges for any human service or for any commodity. It is important in this connection to recall that the law does not require a physician or surgeon to be an expert or to be the most competent man, even in his community, but that he shall have the qualifications merely of the average practitioner in his community, and this has been time and again interpreted as applying to smaller divisions, districts, or communities rather than to the State as a whole; recognizing the fact that should be here recognized, namely, that the conditions of medical and surgical practice vary through the widest limits in different parts of the State.

For example, in a certain town in California, the population is small but is uniformly well-to-do. There, the local practitioners co-operate, and the fees are large and every one is satisfied; but forty miles away, in another town, the inhabitants are relatively poor and of necessity the professional charges must be small. It would seem, therefore, that the difficulties of establishing a fee bill which shall govern the members of the State Medical Society in their charges, and which, therefore, must be uniform for the entire State, are well nigh insurmountable, for the charges which would be manifestly just in one community might be outrageously unfair in another.

It is competent to observe that our sister profession of the law has no State fee bill. In fact, it has fee bills in only a few of the communities in the State.

The matter of a fee bill became acute in the California State Medical Society in 1911, when the Workmen's Compensation Law went into effect. The difficulties of securing an agreement of a definite policy were so great that the matter was postponed from year to year without definite action being taken, and the insurance companies and the Industrial Accident Commission, without the co-operation of the medical profession, adopted a fee schedule for industrial accident cases. This schedule was subjected to the most virulent criticism, but, after all, has worked out fairly well because of the somewhat liberal interpretation of the arrangement by the Industrial Accident Commission, chiefly under the influence of its medical director. While the compensation is small for the individual items, criticism of the schedule is heard less and less because the bills are paid and there is no expense for collection, and there are no losses because of bad debts. The fear that this schedule might have a disastrous effect in greatly lowering professional fees in general seems not to have been well founded. Not long since the schedule was raised 25 per cent, pretty much all along the line. To this schedule most men who are doing industrial accident work adhere, and yet there are many medical men who are willing to cut even its small fees and accept salaries from physicians,

insurance companies, and other laymen who are able to control a considerable amount of such work. If men will cut such a schedule of fees, there would appear to be no means of controlling their actions in cutting fees under a schedule that the State society might adopt.

Therefore it is the sense of the committee that the State society do not embark in the enterprise of establishing a fee bill; that in our opinion it is rather the function of the component societies to adopt and enforce fee bills suitable to the conditions of their individual communities, if in the judgment of the local profession in such communities there is adequate need for a fee bill.

We would conclude with the words of one of the members of the society, whom we consulted in the matter, that "a profession has no price, and it is vital that an artist be permitted to dispose of the products of his genius in any way that he may please."

AUDITOR'S REPORT OF ACCOUNTS OF COMMITTEE OF ARRANGEMENTS

Dr. W. E. Musgrave, Chairman Committee of Arrangements, American Medical Association Convention, 1923.

Dear Sir: Consequent to your request, we have audited the accounts concerned with the financial transactions incidental to the 1923 convention of your association. We thereupon present the following statement of cash receipts and disbursements, which we certify to be correctly prepared from the accounts as shown by the books. Vouchers properly approved have been examined in support of all disbursements. All information requested has been satisfactorily received. We are, dear sir,

Faithfully yours,

LESTER HERRICK AND HERRICK.

AMERICAN MEDICAL ASSOCIATION CONVENTION 1923

SAN FRANCISCO, CALIFORNIA

Statement of Cash Receipts and Disbursements December 12, 1922, to July 31, 1923

Cash Receipts	\$24,977.15
General contributions.....	\$23,039.00
American Medical Association of Chicago	1,865.65
Sale of furniture.....	70.00
Sale of "Medical California".....	2.50
Cash Disbursements	24,943.27
"Medical California"	\$9,894.30
Entertainment (President's reception, dinners, tours, etc.)	6,089.15
Printing, advertising, circulars, programs, postage	2,613.67
Office salaries	2,188.00
Auditorium expenses	1,675.65
Telephone and telegraph.....	618.20
Office rent	600.00
Furniture	529.00
Badges	400.00
General supplies and expense.....	335.30
Cash on hand August 1, 1923	\$33.88